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REDACTED - FOR PUBLIC INSPECTION

June 30, 2014

7852 Walker Drive, Suite 200
Greenbelt, Maryland 20770
phone: 301-459-7590, fax: 301-577-5575
internet: www.jsitel.com, e-mail: jsi@jsitel.com

ACCEPTED/FILED

JUN 30 2014

Federal Communications Commission
Office of the Secretary

Via Hand Delivery

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, SW
Washington, DC 20554

**Re: WC Docket No. 10-90, WC Docket No. 11-42
2014 ETC Annual Report of Hargray Telephone Company, Inc.
Study Area Code 240523**

Dear Ms. Dortch:

On behalf of Hargray Telephone Company, Inc. ("Hargray"), JSI files the attached confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission's rules.¹ Hargray seeks confidential treatment under Protective Order for section 54.313(f)(2) financial information.² The redacted version is also being filed this date via the FCC's Electronic Comment Filing System. In addition, attached is a letter requesting confidential treatment under Sections 0.457 and 0.459 of the initial section 54.202(a) Five-Year Service Quality Improvement Plan.³

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall
JSI Vice President
301-459-7590
jkuykendall@jsitel.com

cc: Charles Tyler, Telecommunications Access Policy Division (two copies, confidential)

No. of Copies rec'd 0+3
List ABCDE

¹ 47 C.F.R. §§ 54.313, 54.422.

² *Connect America Fund et al.*, WC Docket No. 10-90 *et al.*, Protective Order, DA 12-1857 rel. Nov. 16, 2012 (Protective Order). 47 C.F.R. § 54.313(f)(2).

³ 47 C.F.R. §§ 0.457, 0.459, 54.202(a).

Echelon Building II, Suite 200
9430 Research Blvd., Austin, TX 78759
phone: 512-338-0473, fax: 512-346-0822

Eagandale Corporate Center, Suite 310
1380 Corporate Center Curve, Eagan, MN 55121
phone: 651-452-2660, fax: 651-452-1909

6849 Peachtree Dunwoody Road
Bldg. B-3, Suite 200, Atlanta, GA 30328
phone: 770-569-2105, fax: 770-410-1608

547 South Oakview Lane
Bountiful, UT 84010
phone: 801-294-4576, fax: 801-294-5124



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Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, SW
Washington, DC 20554

**Re: WC Docket No. 10-90, WC Docket No. 11-42
2014 ETC Annual Report of Hargray Telephone Company, Inc.
Study Area Code 240523
Request for Confidentiality**

Dear Ms. Dortch:

John Staurulakis, Inc. ("JSI"), on behalf of its client Hargray Telephone Company, Inc. (the "Company") hereby requests, pursuant to Sections 0.457 and 0.459 of the Commission's rules,¹ withholding from public inspection certain information contained in an attachment to the above referenced reporting requirement. The Company provides the following in support of its request, numbered consistent with the subparagraphs of Section 0.459(b).²

1. The information for which the Company is seeking confidential treatment is an attachment to the Company's annual reporting information pursuant to Sections 54.313 and 54.422 of the Commission's rules ("Report").³
2. Rate-of-Return Eligible Telecommunications Carriers ("ETCs") must file with the Commission an initial section 54.202(a) Five-Year Service Quality Improvement Plan ("Five-Year Plan") which is contained in the attachment to the 2014 Report.⁴
3. The information contained in attachment for which the Company seeks the withholding from public inspection is the entirety of data pertaining to the Company's Five-Year Plan provided at FCC Form 481 Line 112 attachment. Information of this nature is confidential commercial information routinely withheld from public inspection.

¹ 47 C.F.R. §§ 0.457, 0.459.

² 47 C.F.R. § 0.459(b)(1) through (9).

³ 47 C.F.R. §§ 54.313, 54.422.

⁴ See *In the Matter of Connect America Fund*, WC Docket No. 10-90, Order DA 14-591 (rel. May 1, 2014).

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547 South Oakview Lane
Bountiful, UT 84010
phone: 801-294-4576, fax: 801-294-5124

been providing to them for many years as well as to satisfy mandatory reporting requirements and does not share the information for which protection is sought. The Company protects the secrecy of this information with a security protocol that ensures the information is not inadvertently disclosed or disseminated. Only directors, managers and employees with a direct need to know are authorized to access the information.

7. Any previous versions of this information are not publicly available.
8. Because the information is not routinely available, a need exists for maintaining the confidentiality of this information permanently.
9. Not applicable.

Based on the preceding, JSI respectfully requests on behalf of the Company that the Commission grant confidential treatment under Section 0.459 to Company's Five-Year Plan provided at FCC Form 481 Line 112 attachment.

Please contact the undersigned with any questions regarding this request.

Sincerely,



John Kuykendall
JSI Vice President
301-459-7590
jkuykendall@jsitel.com

**FCC Form 481 - Carrier Annual Reporting
Data Collection Form**
REDACTED FOR PUBLIC INSPECTION
FCC Form 481

OMB Control No. 3050-0086/OMB Control No. 3050-0018

July 2013

<010> Study Area Code 240523
 <015> Study Area Name HARGRAY TEL CO
 <020> Program Year 2015
 <030> Contact Name: Person USAC should contact with questions about this data Cissy Zareva
 <035> Contact Telephone Number: 8436861256 ext. Number of the person identified in data line <030>
 <039> Contact Email Address: cissy.zareva@htc.hargray.com Email of the person identified in data line <030>

**ACCEPTED/FILED
JUN 30 2014**

 Federal Communications Commission
Office of the Secretary

ANNUAL REPORTING FOR ALL CARRIERS		54.313 Completion Required	54.422 Completion Required
		(check box when complete)	
<100> Service Quality Improvement Reporting	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<200> Outage Reporting (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210> <input checked="" type="checkbox"/> <-- check box if no outages to report		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<300> Unfulfilled Service Requests (voice) 0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<310> Detail on Attempts (voice)	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<320> Unfulfilled Service Requests (broadband) 0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<330> Detail on Attempts (broadband)	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<400> Number of Complaints per 1,000 customers (voice)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<410> Fixed 0.0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<420> Mobile 0.0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<430> Number of Complaints per 1,000 customers (broadband)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<440> Fixed 0.0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<450> Mobile 0.0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<500> Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510> 240523SCS10.pdf	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610> 240523SC610.pdf	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<710> Company Price Offerings (broadband)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<800> Operating Companies and Affiliates	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)?	(if yes, complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1000> Voice Services Rate Comparability	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1010>	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1100> Terrestrial Backhaul (Y/N)?	(if not, check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1110>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1200> Terms and Condition for Lifeline Customers	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000> (check to indicate certification)
 <2005> (complete attached worksheet)

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000> (check to indicate certification)
 <3005> (complete attached worksheet)

**(100) Service Quality Improvement Reporting
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	240523
<015>	Study Area Name	HARGRAY TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Cissy Zareva
<035>	Contact Telephone Number - Number of person identified in data line <030>	8436861256 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cissy.zareva@htc.hargray.com

<110>	Has your company received its ETC certification from the FCC?	(yes / no) <input type="radio"/> <input checked="" type="radio"/>
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no) <input type="radio"/> <input type="radio"/>

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

240523SC112.pdf

Name of Attached Document

Please check these boxes below to confirm that the attached documents(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

- <113>** Maps detailing progress towards meeting plan targets
- <114>** Report how much universal service (USF) support was received
- <115>** How (USF) was used to improve service quality
- <116>** How (USF) was used to improve service coverage
- <117>** How (USF) was used to improve service capacity
- <118>** Provide an explanation of network improvement targets not met in the prior calendar year.

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<701>	Residential Local Service Charge Effective Date	1/1/2014
<702>	Single State-wide Residential Local Service Charge	

See attached worksheet

(710) Broadband Price Offerings Data Collection Form FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	240523
<015>	Study Area Name	HARGRAY TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Cissy Zareva
<035>	Contact Telephone Number - Number of person identified in data line <030>	8436861256 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cissy.zareva@htc.hargray.com

[illegible]

Data Collection Form

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<810>	Reporting Carrier	Hargray Telephone Company, Inc.
<811>	Holding Company	Hargray Communications Group, Inc.
<812>	Operating Company	

[illegible]

**(900) Tribal Lands Reporting
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	240523
<015>	Study Area Name	HARGRAY TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Cissy Zareva
<035>	Contact Telephone Number - Number of person identified in data line <030>	8436861256 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cissy.zareva@htc.hargray.com

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select (Yes, No, NA)

**(1100) No Terrestrial Backhaul Reporting
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	240523
<015>	Study Area Name	HARGRAY TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Cissy Zareva
<035>	Contact Telephone Number - Number of person identified in data line <030>	8436861256 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cissy.zareva@htc.hargray.com

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G) ☐

<1130> Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G) ☐

(1200) Terms and Condition for Lifeline Customers

Lifeline

Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	240523
<015>	Study Area Name	HARGRAY TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Cissy Zareva
<035>	Contact Telephone Number - Number of person identified in data line <030>	8436861256 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cissy.zareva@hrc.hargray.com

240523SC1210.pdf

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

Name of Attached Document

<1220> Link to Public Website

HTTP

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒
- <1222> Details on the number of minutes provided as part of the plan, ☒
- <1223> Additional charges for toll calls, and rates for each such plan. ☒

(2000) Price Cap Carrier Additional Documentation

Data Collection Form

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	240523
<015>	Study Area Name	HARGRAY TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Cissy Zareva
<035>	Contact Telephone Number - Number of person identified in data line <030>	8436861256 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cissy.zareva@hrc.hargray.com

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

- <2010> 2nd Year Certification (47 CFR § 54.313(b)(1)) ☐
- <2011> 3rd Year Certification (47 CFR § 54.313(b)(2)) ☐

Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))

- <2012> 2013 Frozen Support Certification ☐
- <2013> 2014 Frozen Support Certification ☐
- <2014> 2015 Frozen Support Certification ☐
- <2015> 2016 and future Frozen Support Certification ☐

Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))

- <2016> Certification Support Used to Build Broadband ☐

Connect America Phase II Reporting (47 CFR § 54.313(e))

- <2017> 3rd year Broadband Service Certification ☐
- <2018> 5th year Broadband Service Certification ☐
- <2019> Interim Progress Certification ☐
- <2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☐

- <2021> Interim Progress Community Anchor Institutions

Name of Attached Document Listing Required Information

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(3000) Rate of Return Carrier Additional Documentation

Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010> Study Area Code	240523
<015> Study Area Name	HARGRAY TEL CO
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Cissy Zareva
<035> Contact Telephone Number - Number of person identified in data line <030>	8436861256 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	cissy.zareva@htc.hargray.com

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3010) Progress Report on 5 Year Plan
Milestone Certification (47 CFR § 54.313(f)(1)(i))

Name of Attached Document Listing Required Information

(3011) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

(3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))

Name of Attached Document Listing Required Information

(3013) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))

(3014) If yes, does your company file the RUS annual report

(Yes/No) ☒ ☒

Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:

(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)

(3016) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

Name of Attached Document Listing Required Information

(3018) If the response is no on line 3014, Is your company audited?

(Yes/No) ☒ ☐

If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

(3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications

(3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3021) Management letter issued by the independent certified public accountant that performed the company's financial audit.

If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

(3022) Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,

(3023) Underlying information subjected to a review by an independent certified public accountant

(3024) Underlying information subjected to an officer certification.

(3025) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

240523SC3026 .pdf

(3026) Attach the worksheet listing required information

Name of Attached Document Listing Required Information

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0586/OMB Control No. 3060-051 July 2013
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<010> Study Area Code	240523
<015> Study Area Name	HARGRAY TEL CO
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Cissy Zareva
<035> Contact Telephone Number - Number of person identified in data line <030>	8436861256 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	cissy.zareva@htc.hargray.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0386/OMB Control No. 3060-0035 July 2013
---	--

<010> Study Area Code	240523
<015> Study Area Name	HARGRAY TEL CO
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Cissy Zareva
<035> Contact Telephone Number - Number of person identified in data line <030>	8436861256 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	cissy.zareva@htc.hargray.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) <u>JSI</u> is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	JSI
Name of Reporting Carrier:	HARGRAY TEL CO
Signature of Authorized Officer:	CERTIFIED ONLINE Date: 06/27/2014
Printed name of Authorized Officer:	David Armistead
Title or position of Authorized Officer:	General Counsel & Secretary
Telephone number of Authorized Officer:	8436861275 ext.
Study Area Code of Reporting Carrier:	240523 Filing Due Date for this form: 07/01/2014
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	HARGRAY TEL CO
Name of Authorized Agent or Employee of Agent:	John Staurulakis, Inc.
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE Date: 06/27/2014
Printed name of Authorized Agent or Employee of Agent:	Mark A. Ozanick
Title or position of Authorized Agent or Employee of Agent:	Staff Consultant
Telephone number of Authorized Agent or Employee of Agent:	7705692105 ext.
Study Area Code of Reporting Carrier:	240523 Filing Due Date for this form: 07/01/2014
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

REDACTED FOR PUBLIC INSPECTION

Attachments

REDACTED – FOR PUBLIC INSPECTION

HARGRAY TELEPHONE COMPANY (SAC 240523)

ATTACHMENT - LINE 112

FIVE YEAR SERVICE QUALITY IMPROVEMENT PLAN

ATTACHMENT REDACTED IN ENTIRETY

Hargray Telephone Company, Inc.'s demonstration of complying with applicable service quality standards and consumer protection rules for voice and broadband services:

In establishing this certification in its *2005 ETC Order*,¹ the FCC found that an ETC must make "a specific commitment to objective measures to protect consumers."² The FCC found that for wireless ETCs, compliance with CTIA's Consumer Code for Wireless Service would satisfy this requirement and that the sufficiency of other commitments would be considered on a case-by-case basis.³ In this context, the FCC stated, "to the extent a wireline or wireless ETC applicant is subject to consumer protection obligations under state law, compliance with such laws may meet our requirement."⁴

Hargray Telephone Company, Inc. ("Hargray") hereby certifies that it is in compliance with applicable service quality standards and consumer protection rules. Hargray is subject to consumer protection obligations under both federal and South Carolina state law. These obligations include, but are not limited to, the following: (1) filing a Local Exchange Tariff pursuant to the requirements of the Public Service Commission of South Carolina which disclose rates, and terms and conditions of service to customers (Section 103-612.2.1 of the South Carolina Code of Regulations); (2) adherence to state consumer protection requirements governing telephone providers which govern Standards and Quality of Service (Sections 103-661, 103-662, and 103-663 of the South Carolina Code of Regulations); Customer Relations, including billing,

¹ *Federal-State Joint Board on Universal Service*, CC Docket No. 96-45, Report and Order, FCC 05-46 (rel. Mar. 17, 2005) ("*2005 ETC Order*").

² *Id.* at para. 28.

³ *Id.* The FCC noted that under the CTIA Consumer Code, wireless carriers agree to: "(1) disclose rates and terms of service to customers; (2) make available maps showing where service is generally available; (3) provide contract terms to customers and confirm changes in service; (4) allow a trial period for new service; (5) provide specific disclosures in advertising; (6) separately identify carrier charges from taxes on billing statements; (7) provide customers the right to terminate service for changes to contract terms; (8) provide ready access to customer service; (9) promptly respond to consumer inquiries and complaints received from government agencies; and (10) abide by policies for protection of consumer privacy." *Id.* at n. 71.

⁴ *Id.* at n. 72.

deposits, discontinuance and termination of service (Sections 103-620 through 103-633 of the South Carolina Code of Regulations); Engineering and Safety Standards (Sections 103-640 through 103-646 and 103-670 through 103-672 of the South Carolina Code of Regulations); Inspections and Tests (Sections 103-650 through 103-653 of the South Carolina Code of Regulations); Records and Reports (Sections 103-610 through 103-619 of the South Carolina Code of Regulations) and Customer Complaints (Section 103-628 of the South Carolina Code of Regulations); (3) truth-in-billing requirements (Section 103-622.1 of the South Carolina Code of Regulations); and (4) CPNI, Red Flag Rules and other applicable federal and state requirements governing the protection of customers' privacy.

Hargray is subject to consumer protection obligations for broadband services under federal law. These obligations include, but are not limited to, the following: public disclosure of accurate information regarding network management practices, performance, and commercial terms of broadband internet access services; as a means of providing sufficient information for consumers to make informed choices regarding use of such services, and for content, application, service and device providers to develop, market, and maintain internet offerings as specified in 47 CFR § 8.3.

Hargray Telephone Company's demonstration of ability to function in emergency situations for voice and broadband services:

Hargray Telephone Company, Inc. ("Hargray") hereby certifies that it is able to function in emergency situations as set forth in 47 C.F.R. § 54.202(a)(2)¹ and Section 103-646 of the South Carolina Code of Regulations. Hargray's network is designed to remain functional in emergency situations without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations as required by Section 54.202(a)(2) and Section 103-646 of the South Carolina Code of Regulations. Hargray can change call routing translations as needed to reroute traffic around damaged facilities. Changing call routing translations will also allow Hargray to manage traffic spikes throughout its network, as emergency situations require. In addition, Hargray has redundancy for connectivity purposes *via* additional routes and electronic equipment for voice and broadband services.

Specifically, each central office building is supplied with standby generators and battery back-up that enable the central office to keep running until power is restored so long as fuel is available, or until system changes are made to reroute traffic. Hargray has battery backup at all office locations and in its electronic equipment sites. Length of run time is determined by the equipment serving the area and the number of customers working out of the equipment. Generators are installed at all Central Office locations. They will continue to run as long as Hargray has access to fuel.

¹ Section 54.202(a)(2) requires ETCs that are designated by the Commission to "demonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations."

REDACTED FOR PUBLIC INSPECTION

**(700) Price Offerings including Voice Rate Data
Data Collection Form**

FCC Form 481

OMB Control No: 3060-0986/OMB Control No: 3060-0819
July 2013

<010> Study Area Code	240523
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<015>	Study Area Name	HARGRAY TEL CO
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<020>	Program Year	2015
-------	--------------	------

<030>	Contact Name - Person USAC should contact regarding this data	Cissy Zareva
-------	---	--------------

<035>	Contact Telephone Number - Number of person identified in data line <030>	8436861256 ext.
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<039>	Contact Email Address - Email Address of person identified in data line <030>	cissy.zareva@htc.hargray.com
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1/1/2014

<702> Single State-wide Residential Local Service Charge

<703>

[illegible]

REDACTED FOR PUBLIC INSPECTION

(710) Broadband Price Offerings
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	240523
<015>	Study Area Name	HARGRAY TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Cissy Zareva
<035>	Contact Telephone Number - Number of person identified in data line <030>	8436861256 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cissy.zareva@hargray.com

<711>

<a1>

<a2>

<b1>

<b2>

©

<d1>

<d2>

<d3>

100

<d4>

[illegible]

REDACTED FOR PUBLIC INSPECTION

(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	240523
<015>	Study Area Name	HARGRAY TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Cissy Zareva
<035>	Contact Telephone Number - Number of person identified in data line <030>	8436861256 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cissy.zareva@htc.hargray.com
<810>	Reporting Carrier	Hargray Telephone Company, Inc.
<811>	Holding Company	Hargray Communications Group, Inc.
<812>	Operating Company	

[illegible]

South Carolina Lifeline

Under the Lifeline program, telephone customers who participate in Medicaid (Healthy Connections), Food Stamps (SNAP), Temporary Assistance for Needy Families (TANF), School Free Lunch, Section 8, Supplemental Security Income (SSI), or Low Income Home Energy Assistance Program (LIHEAP) are entitled to receive a discount up to \$12.75 per month on their telephone service. If you are a telephone customer that does not participate in any of these programs but your total household income is at or below 135% of Federal Poverty Guidelines, you may be eligible to receive the Lifeline benefit. Hargray is eligible to provide the Lifeline benefit to qualifying residential telephone customers in Hilton Head, Hardeeville and Bluffton.

Lifeline is a government supported service. Applicants will be required to provide documentation necessary to verify eligibility. Applicants who willfully make false statements in order to obtain Lifeline benefits can be punished by fine or barred from the program. Only ONE Lifeline benefit per household. A household is not permitted to receive Lifeline benefits from multiple providers.

Hargray Telephone Company, Inc.
Hilton Head Island, SC
Revised: April 2, 2012

Section 3
1st Revised Page 11
Cancels Original Page 11

BASIC LOCAL EXCHANGE SERVICE

3.10 Lifeline Program

3.10.1 General

- A. The Lifeline program is designed to increase the availability of telecommunications services to low income subscribers by providing a credit to monthly recurring local service for qualifying residential subscribers.
- B. Lifeline is provided under the federal universal service support mechanism as a federal benefit.
- C. Lifeline is mandated by the Federal Communications Commission (FCC).

3.10.2 Regulations and Rates

Regulations and Rates shall be concurrent with those mandated by the FCC and The Public Service Commission of South Carolina.

3.10.3 Eligibility and Certification

Eligibility and Certification shall be concurrent with the requirements of the FCC and The Public Service Commission of South Carolina.

GENERAL CUSTOMER SERVICES TARIFF

HARGRAY TELEPHONE COMPANY, INC.
HILTON HEAD ISLAND, S.C.
EFFECTIVE: July 2, 2013

SECTION 3
16th Revised Page 1
Cancels 15th Revised Page 1

S3. LOCAL EXCHANGE SERVICE

(C)

S3.1 General

3.1.1 Local exchange service rates in this tariff are as identified with the Hargray Telephone Co., Inc. of Hilton Head Island, South Carolina.

3.1.2 Extended Area Service (EAS)

a. Implemented pursuant to South Carolina Public Service Commission Order No. 2007-346

(T)

b. Expands local calling to include the following exchange areas:

(T)

Beaufort, SC	Bluffton, SC
Hardeeville, SC	Ridgeland, SC
Hilton Head Island, SC	Savannah, GA
Laurel Bay, SC	St. Helena, SC
Pooler, GA	Tybee Island, GA

c. Monthly recurring charge per line of:

\$2.25/Residential

\$4.50/Business

(N)

3.1.3 Local Exchange Service Offerings

(N)

a. **Limited Local Service** allows voice calls to the areas identified in 3.1.2(b) preceding.

Voice calls made outside of 3.1.2(b) preceding, are subject to additional charges.

(N)

b. **Basic Local Service** allows calls to any location within the United States and its Territories including but not limited to Alaska, Hawaii, U.S. Virgin Islands, Puerto Rico, Northern Antilles and Guam.

(M)

Applies to residential lines only and not offered in conjunction with business lines

(T)

Intended for normal voice usage equal to, or less than 3,600 usage minutes per month excluding usage minutes for calls placed to any area listed in 3.1.2(b) preceding.

(N)

In the event monthly usage exceeds 3,600 minutes per month, excess usage charges apply at \$0.01 per minute for each minute in excess of 3,600 minutes

(N)

(T)

3.1.4 Rates for service and equipment not specifically shown in this section are presented in other sections of this tariff.

GENERAL CUSTOMER SERVICES TARIFF

HARGRAY TELEPHONE COMPANY, INC.
HILTON HEAD ISLAND, S.C.
EFFECTIVE: July 2, 2013

SECTION 3
16th Revised Page 1.1
Cancels 15th Revised Page 1.1

S3. LOCAL EXCHANGE SERVICE

S3.2 Monthly Exchange Rates

3.2.1 Monthly exchange rates are authorized by the Public Service Commission of South Carolina as shown below. (M)

3.2.2 Limited Local Service as identified in 3.1.3(a) preceding (C)

	<u>Monthly Rate</u>	(N)
a. Residential		
Each Single	\$ 14.65	
EAS	\$ 2.25	
Base Charge	\$ 16.90	
b. Business		
Each Single Line, Key Trunk, PBX Trunk or Paystation	\$ 29.29	
EAS	\$ 4.50	
Base Charge	\$ 33.79	

3.2.3 Basic Local Service as defined in Section 3.1.3(b) preceding

a. Residential Single Line	\$ 21.74	
EAS	\$ 2.25	
Base Charge	\$ 23.99	(C) (M)

South Carolina Lifeline Assistance Application

Step 1: Applicant Information *(fill in each block entirely)*

Your Hargray Phone #	First Name	MI	Last Name
Address Where Service Is Located (No PO Boxes)			City & State
Is this your permanent address? (circle one) <div style="text-align: center;">YES NO</div>			Zip Code
Billing Address, City, State & Zip Code (If different from Service Address) (PO Boxes Allowed)			
Last 4 Digits of Social Security Number			Date of Birth

Step 2: Determine whether you qualify for lifeline based on participation in the eligible programs of section A, or because you meet the income eligibility requirements of section B.

Section A

PROGRAM ELIGIBILITY: check the following program(s) in which you, **or** a member of your household, currently participate. Please attach a copy of eligibility documentation. If the program participant is not you, but a member of your household, please print the name of the program participant here:

Federal Public Housing Assistance (FPHA) or Section 8	Supplemental Security Income (SSI)
National School Lunch Program – Free Lunch Program	Medicaid
Low Income Home Energy Assistance Program (LIHEAP)	Temporary Assistance for Needy Families (TANF)
Supplemental Nutrition Assistance Program (SNAP) <i>formerly known as food stamps</i>	

Section B

INCOME ELIGIBILITY GUIDELINES: If you do not participate in any of the programs above, you may still be eligible for Lifeline Assistance if your annual household income is at or below the amounts shown below (135% of 2014 FPG) depending on the size of your household. PLACE A CHECK next to the total number of people in your household. Please indicate the number of household members if more than 8.

Persons in family/household	2014 Poverty Guideline – 135%
1 _____	\$15,755
2 _____	\$21,236
3 _____	\$26,717
4 _____	\$32,198
5 _____	\$37,679
6 _____	\$43,160
7 _____	\$48,641
8 _____	\$54,122
For families/households with more than 8 persons, add \$5,481 for each additional person:	

PLEASE COMPLETE NEXT PAGE. BOTH PAGES OF THIS APPLICATION ARE REQUIRED IN ORDER TO PROCESS YOUR APPLICATION

South Carolina Lifeline Assistance Application

IT IS IMPORTANT FOR YOU TO KNOW:

- Lifeline is a federal benefit and willfully making false statements to obtain the benefit can result in fines, imprisonment, de-enrollment or being barred from the program
- Only one Lifeline service is available per household
- A household is defined, for purposes of the Lifeline program, as any individual or group of individuals who live together at the same address and share income and expenses
- A household is not permitted to receive Lifeline benefits from multiple providers
- Violation of the one-per-household limitation constitutes a violation of the Federal Communications Commission's (or "FCC") rules and will result in the subscriber's de-enrollment from the program
- Lifeline is a non-transferable benefit and the subscriber may not transfer his or her benefit to any other person

YOUR APPLICATION CANNOT BE PROCESSED WITHOUT YOUR CERTIFICATION:

Certification

I certify, under penalty of perjury, that:

- I meet the income-based or program-based eligibility criteria for receiving Lifeline, shown above.
- I will notify the carrier within 30 days if for any reason I no longer satisfy the criteria for receiving Lifeline including, as relevant, (a) if I no longer meet the income-based or program-based criteria for receiving Lifeline support; (b) I am receiving more than one Lifeline benefit, (c) or another member of my household is receiving a Lifeline benefit.
- If I move to a new address, I will provide that new address to Hargray within 30 days.
- My household will receive only one Lifeline service and, to the best of my knowledge, my household is not already receiving a Lifeline service.
- The information contained in this certification form is true and correct to the best of my knowledge.
- I acknowledge that providing false or fraudulent information to receive Lifeline benefits is punishable by law.
- I acknowledge that I may be required to re-certify my continued eligibility for Lifeline at any time, and my failure to re-certify my continued eligibility will result in de-enrollment and the termination of my Lifeline benefits.

I hereby authorize Hargray to release any of my information contained in this Lifeline Application required for the administration of the Lifeline program to the FCC or its designee, including the Universal Service Administrative Company, and to any state and federal agency, as required by law.

Applicant's Signature: _____ Date: _____

REDACTED – FOR PUBLIC INSPECTION

HARGRAY TELEPHONE COMPANY (SAC 240523)

ATTACHMENT - LINE 3026

ATTACHMENT REDACTED IN ENTIRETY